UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES



OMB APPROVAL

DATE RECEIVED

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PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

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Name of Offering(check if this is an amendment and name has changed, and indicate change.) 11.25% Investment Trust Certificates (Sukuk)	C. WAIL
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	JU
A. BASIC IDENTIFICATION DATA	2000
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) East Cameron Gas Company, as Trustee of the East Cameron Gas Company Sukuk Trust	SECTION
Address of Executive Offices (Number and Street, City, State, Zip Code) P.O. Box 908 GT, Walker House, Mary Street, Grand Cayman, Cayman Islands	Telephone Number (Including Area Code) (1) 345-945-3727
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Issuer is the trustee of a special purpose trust.	
	lease specify): d liability company
Actual or Estimated Date of Incorporation or Organization: Month Year Actual or Estimated Date of Incorporation or Organization: O 7 0 6	AUS 0 3 2005 THOMSON FINANCIAL

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Promoter ☐ Beneficial Owner Executive Officer Director General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) David Egglishaw Business or Residence Address (Number and Street, City, State, Zip Code) P.O. Box 908 GT, Walker House, Mary Street, Grand Cayman, Cayman Islands Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) **Derrie Boggess** Business or Residence Address (Number and Street, City, State, Zip Code) P.O. Box 908 GT, Walker House, Mary Street, Grand Cayman, Cayman Islands Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) John Cullinane Business or Residence Address (Number and Street, City, State, Zip Code) P.O. Box 908 GT, Walker House, Mary Street, Grand Cayman, Cayman Islands Beneficial Owner Check Box(es) that Apply: Promoter **Executive Officer** Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Director Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner Check Box(es) that Apply: Promoter Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

		4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		ga þáld	B. IN	FORMAT	ION ABOU	T OFFER	ING .	944 ⁹⁰ (1947)	15.00		447
1.	Has the	e issuer sold	, or does the	issuer inte	nd to sell, t	o non-accre	dited investo	ors in this o	ffering?			Yes	No ⊠
			•				nn 2, if filin						
2.	What i	s the minim	um investme								•••••	\$ 250,000.0	00
2. What is the minimum investment that will be accepted from any individual?										Yes	No		
3. 4.	Enter to commit If a per or state	the informates in sign or sime son to be list the new terms of terms of th	permit joint of tion requested tilar remuner sted is an ass ame of the be you may set	ed for each ration for se sociated per broker or de	person wholicitation of ager rson or ager aler. If mo	no has beer of purchaser nt of a broke re than five	or will be s in connect er or dealer i (5) persons	paid or given ion with savegistered we to be listed	ven, directly les of secur with the SEC	y or indired ities in the d and/or wit	tly, any offering. h a state	. 🗆	
Me	rrill Ly	nch, Pierce	Fenner &	Smith Inc			7-4-)						
			Address (Nu Vorld Finar										
Nan	ne of As	sociated Br	oker or Deal	er									
Stat	es in W	hich Person	Listed Has	Solicited or	Intends to	Solicit Purc	hasers						
	(Che	eck "All Stat	tes" or check	individual	States)								Il States
	AL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH	KY NJ TX	CO LA NM UT	ET ME VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Full	Name (Last name 1	first, if indiv	idual)									
Bus	iness or	Residence	Address (Nu	mber and S	Street, City,	State, Zip (Code)						
Nan	ne of As	ssociated Br	oker or Deal	ler									
Stat	es in W	hich Person	Listed Has	Solicited or	Intends to	Solicit Purc	hasers						
	(Ch	eck "All Sta	tes" or check	c individual	States)						, , , , , , , ,	🗆 A	All States
	AL IL MT	AK IN NE SC	AZ IA VV SD	KS NH IZ	CA KY NJ TX	LA NM UT	ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Full	Name (Last name i	first, if indiv	idual)									
Bus	iness or	Residence	Address (Nu	mber and S	Street, City,	State, Zip (Code)						
Nan	ne of As	sociated Br	oker or Deal	er				· - 					
Stat			Listed Has tes" or check			Solicit Purc	hasers					🗆 A	II States
	AL IL MT	IN NE SC	AZ IA NV	AR KS NH TN	CA KY NJ TX	LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price	Α	smount Already Sold
	Debt\$		\$_	
	Equity\$		\$_	
	Common Preferred			
	Convertible Securities (including warrants)\$		\$	
	Partnership Interests\$		-	
	Other (Specify Trust Certificates)		_	
	Total\$		_	
	Answer also in Appendix, Column 3, if filing under ULOE.	 		
	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			Aggregate
		Number Investors		Dollar Amount of Purchases
	Accredited Investors	12	\$	54,500,000
	Non-accredited Investors		\$	
	Total (for filings under Rule 504 only)	12	\$	54,500,000
	Answer also in Appendix, Column 4, if filing under ULOE.			
	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
	Type of Offering	Type of Security]	Dollar Amount Sold
	Rule 505		\$	
	Regulation A		\$	
	Rule 504		\$	
	Total			0
•	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees		\$	
	Printing and Engraving Costs	_		
	Legal Fees			
	Accounting Fees			
	Engineering Fees			
	Sales Commissions (specify finders' fees separately)	-	_	
	Other Expenses (identify)			
	Total			0
			Ψ.,	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

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	C. OFFERING PRICE, NUM	MBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
	and total expenses furnished in response to Part C -	ering price given in response to Part C — Question 1 — Question 4.a. This difference is the "adjusted gross		\$ 54,500,000
5.	Indicate below the amount of the adjusted gross peach of the purposes shown. If the amount for a	roceed to the issuer used or proposed to be used for ny purpose is not known, furnish an estimate and of the payments listed must equal the adjusted gross	I	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		□ \$	_ 🗆 \$
	Purchase of real estate		\$	_ 🗆 \$
	Purchase, rental or leasing and installation of ma			
	• •	cilities		
			□ \$	_ ⊔ »
		sets or securities of another		
	• •			
		ffraing to Levisiana Offshara Helding LLC to	S	_ 🗆 \$
		ffering to Louisiana Offshore Holding, LLC to ng royalty interest in oil and gas properties	\$	[\$ _54,500,000
			□ \$	🗆 \$
	Column Totals		□s	0
	Total Payments Listed (column totals added)\$			54,500,000
		D. FEDERAL SIGNATURE	<i>t</i>	
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to full formation furnished by the issuer to any non-accordance.	irnish to the U.S. Securities and Exchange Commis	ssion, upon writt	
Iss	uer (Print or Type)	Signature	Date	
	st Cameron Gas Company, as Trustee	It tolm	July 18 2006	
_	me of Signer (Print or Type)	Title of Signer (Print or Type)		
Jol	nn Cullinane	Director		_

— ATTENTION —

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

;		E. STATE SIGNATURE								
1.		presently subject to any of the disqualification Yes No								
		See Appendix, Column 5, for state response	.							
2.	 The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Fo D (17 CFR 239.500) at such times as required by state law. 									
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.									
4.	limited Offering Exemption (ULOE) of the	ne issuer is familiar with the conditions that the state in which this notice is filed and under the polishing that these conditions have been satisfied.	erstands that the issuer clair							
	er has read this notification and knows the chorized person.	contents to be true and has duly caused this no	tice to be signed on its beha	lf by the undersign						
Issuer (Print or Type)	Signature	Date							
East Ca	meron Gas Company, as Trustee	- Mak HE	July 18 2006							
Name (1	Print or Type)	Title (Print or Type)								

Director

Instruction:

John Cullinane

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

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APPENDIX

1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
AL										
AK									·	
AZ										
AR										
CA		X	Trust Certificates \$4,500,000	2	4,500,000	0	0		Х	
СО										
СТ										
DE		X	Trust Certificates \$36,770,000	6	36,770,000	0	0		Х	
DC										
FL										
GA										
НІ										
ID										
IL		Х	Trust Certificates \$5,000,000	1	5,000,000	0	0		X	
IN										
IA								7.7		
KS										
KY										
LA										
ME	·									
MD										
MA										
MI										
MN										
MS										

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APPENDIX 5 2 3 4 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach to non-accredited offering price explanation of Type of investor and waiver granted) investors in State offered in state amount purchased in State (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) (Part C-Item 1) Number of Number of Non- Accredited Accredited **Investors Investors** Amount Yes No State Yes No Amount MO MT NE NVNΗ NM Trust Certificates 4,130,000 0 X NY X 2 0 \$4,130,000 NC

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NJ

ND

ОН

OK

OR

PA

RI

SC

SD

TN

TX

UT

VT

VA

WA

WV

WI

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				API	PENDIX					
1	1 2 3				4				5 Disqualification	
Intend to sell to non-accredited investors in State (Part B-Item 1)			Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
WY										
PR	,									